PTO/SB/23 (08-03)
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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) Docket Number (Optiona 4013-00100 | | | Docket Number (Optional) 4013-00100 |
|--|--|-------------------------------|--|
| OTE | In re Application of: Lucy Broyles | | |
| FEB 1 : 2005 | Application Number: 09/747,909 | | Filed: December 22, 2000 |
| | For: Personalize Repetitive Language Kit and Process | | |
| | Group Art Unit: 3722 | Examiner: Monica Smith Carter | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application. | | | |
| The requested extension and appropriate non-small-entity fee are as follows (check time period desired): | | | |
| One month (37 CFR 1.17(a)(1)) | \$ <u>120.00</u> | | .00 |
| ☐ Two months (37 CFR 1.17(a)(2)) | | \$ | |
| ☐ Three months (37 CFR 1.17(a)(3)) | | \$ | |
| Four months (37 CFR 1.17(a)(4)) | | \$ | |
| ☐ Five months (37 CFR 1.17(a)(5)) | | . \$ | - non. |
| Applicant claims small entity status. See 37 CFR 1.27. Therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$60.00 A check in the amount of the fee is enclosed. | | | |
| Payment by credit card. Form PTO-2038 is attached. | | | |
| The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account Number 50-1515. I have enclosed a duplicate copy of this sheet. | | | |
| I am the applicant/inventor assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). Registration Number 31,745 | | | |
| WARNING: Information on this form may be come public. Credit card information should not be included On this form. Provide credit card information and authorization on PTO-2038. | | | |
| Feb. 7,2005 | Mich | 12 | |
| Date | Michael S. Bush Typed or Printed No | ите | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | |
| ☐ Total of forms are submitted. | | | |

02/14/2005 HALI11 00000051 09747909

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